

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	FR
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	0
Title::	METHOD AND DEVICES FOR ADMINISTRATION OF THERAPEUTIC GASES
Attorney Docket Number::	AGALIN 3.0-003 I
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	3
Total Drawing Sheets::	48
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Royce
Middle Name::	S.
Family Name::	Fishman
City of Residence::	Hernando

State or Province of Residence:: FL  
Country of Residence:: US  
Street of mailing address:: 906 W. Skyview Crossing Drive  
City of mailing address:: Hernando  
State or Province of mailing address:: FL  
Postal or Zip Code of mailing address:: 34442

**Correspondence Information**

Correspondence Customer Number:: 000530

**Representative Information**

Representative Customer Number:: 000530

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/404,830	08/20/02

**Assignee Information**

Assignee name:: AGA Linde Healthcare  
Street of mailing address:: SE-181 81  
City of mailing address:: Lidingo  
Country of mailing address:: Sweden